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Subject	Time	Presenter
Background to this initiative <ul style="list-style-type: none"> - Evidence on MH services across UK <ul style="list-style-type: none"> o Staff knowledge and confidence assessing and managing physical health problems is low – affecting the priority this receives in mental health services - Feedback on previous use of simulation from MH nurses on pre-reg course locally: <ul style="list-style-type: none"> o Focus on disease knowledge and treatment and Resuscitation o Students feel incompetent and exposed o Comments on limited relevance to MH practice - Observation in Bradford: <ul style="list-style-type: none"> o Length of sessions with extended time for reflection growing safety within group as day went on– deep learning o Multi-professional learners o Simulation of MH settings/presentations 	1 min	MH
Description of the programme <ul style="list-style-type: none"> - RAMMPS - Programme including scenario details 	2 min	AM
Video clip	2 mins	
Findings Sarah – describe experience Gareth – Handover skills Andy - Comment on contrast between 2 days – uni vs multi-disciplinary participants Ann – summarise evaluation ? discuss those who said the experience decreased their confidence	1 min each	
Next steps <ul style="list-style-type: none"> - Continue to replace de-escalation refresher with this experience - Develop the multi-professional element <ul style="list-style-type: none"> o Liaison with LYPFT o Plan in collaboration with OT, NA, and ? SW courses o Consider role of psychiatrist within training in event of single participant, who is new to the learning experience 	1 mins	MH
Questions	5 minutes	

Using the 'Recognising and Assessing Medical Problems in a Psychiatric Setting' (RAMPPS) course within a Pre-registration Mental Health Nursing Course

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Andy Martin – Senior Lecturer

Ann Sunderland – Director of Clinical Skills and Simulation

Gareth Howell – Core Psychiatric Trainee

Sarah Burden – Co-director of Placement Learning / Senior Lecturer

Sarah Oliver - Student Mental Health Nurse



Background

Mental Health Nurses need enhanced capability, confidence and perceived priority to effectively engage with physical health assessment and care

However.....

- Poor experience of simulation of physical health problems within curriculum

Precipitant for this pilot:

- Opportunity to observe colleagues in Bradford running a RAMPPS day for their staff.
- Saw the true potential of simulation
- THANK YOU!

	Schedule
08.30	Team pre-brief
09.00	Welcome Demonstration film and debrief
10.00	Scenario 1 Delirium, with intensely questioning carer
11.00	Scenario 2 Neuroleptic Malignancy syndrome, with staff member pushing students to administer further neuroleptic medication
11.45	Scenario 3 Loss of consciousness after restraint and rapid tranquillisation
12.30	Lunch
13.30	Scenario 4 Intoxicated person with respiratory depression
15.00	Scenario 5 DVT with Pulmonary embolus with loud, challenging carer in attendance
16.00	Evaluation discussion and questionnaires
16.30	Team debrief

Structure of Debrief

1. Feelings
2. Facts – what was happening?
3. Enquiry – why did you do the things you did?
4. Questions – other issues raised by this scenario?
5. Summary of Learning

The RAMPPS Course Handbook

Developing people
for health and healthcare



Video – Excerpts from Scenario 5. Day 1



With kind permission of:
Naomi Hart & Tom Fordham - Student nurses
Martin Boucher - Simulated Patient Project.

Comments on the pilot

Sarah Oliver – Student experience

Gareth Howell – Skills in handover

Andy Martin – Uni- cf. Multi- disciplinary

Ann - Evaluation



Next steps

- Ditch de-escalation as separate refresher training in final year – replace with RAMPPS
- Collaborate with other pre-registration courses and nursing associate students in future delivery
- Build on collaboration with local Trust psychiatrists – ? blurred role between Faculty and full participant

